



**HAWAII STATE ETHICS COMMISSION**  
1001 BISHOP STREET, ASB TOWER 970  
P.O. BOX 616, HONOLULU, HAWAII 96809  
TEL: 587-0460 FAX: 587-0470  
email: ethics@hawaiiethics.org

THIS SPACE FOR OFFICE USE ONLY

'06 FEB 28 A9:18

D30  
HCTC

STATE OF HAWAII  
STATE ETHICS COMMISSION

## LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

<b>PART I LOBBYIST</b>			
NAME(Last)	(First)	(Middle)	TELEPHONE
Dang	Marvin	S. C.	521-8521
MAILING ADDRESS (Street)			FAX
P.O. Box 4109			521-8522
(City)	(State)	(Zip Code)	
Honolulu	Hawaii	96812-4109	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
MAILING ADDRESS (Street)			FAX
(City)	(State)	(Zip Code)	

<b>PART II ORGANIZATION</b>			
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)			TELEPHONE
Hawaii Coalition for Taxpayer Financial Choice			916-443-8570
MAILING ADDRESS (Street)			FAX
c/o HSBC North America, 1121 L. Street, Ste. 100			916-443-8265
(City)	(State)	(Zip Code)	
Sacramento	California	95814	
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT			TELEPHONE
Marvin S. C. Dang			521-8521
MAILING ADDRESS (Street)			FAX
P.O. Box 4109			521-8522
(City)	(State)	(Zip Code)	
Honolulu	Hawaii	96812-4109	

**PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY**

- |  |   |   |   |
|--|---|---|---|
| <input type="checkbox"/> Agriculture                               | <input type="checkbox"/> Education                                  | <input type="checkbox"/> Human Services                                     | <input type="checkbox"/> Science, Technology & Economic Development |
| <input type="checkbox"/> Communications & Public Utilities         | <input checked="" type="checkbox"/> Government Operations & Finance | <input type="checkbox"/> Intergovernmental Relations, International Affairs | <input type="checkbox"/> Tourism & Recreation                       |
| <input checked="" type="checkbox"/> Consumer Protection & Commerce | <input type="checkbox"/> Hawaiian Affairs                           | <input type="checkbox"/> Labor & Employment                                 | <input type="checkbox"/> Transportation                             |
| <input type="checkbox"/> Culture, Arts, Historic Preservation      | <input type="checkbox"/> Health                                     | <input type="checkbox"/> Planning, Land & Water Use Management              | <input type="checkbox"/> Other: (indicate below)                    |
| <input type="checkbox"/> Ecology, Energy Environmental Protection  | <input checked="" type="checkbox"/> Housing                         | <input type="checkbox"/> Public Safety & Corrections                        |   |

**PART IV CERTIFICATION OF LOBBYIST**

I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.

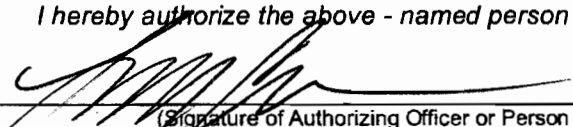


(Signature of Lobbyist)

2/24/06

(Date)

**PART V AUTHORIZATION TO LOBBY**

NAME		TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED	
Larisa Cesepedes			
NAME OF ORGANIZATION (if applicable)		TELEPHONE	
Hawaii Coalition for Taxpayer Financial Choice			
MAILING ADDRESS (Street)		FAX	
c/o HSBC North America, 1121 L. Street, Ste. 100			
(City)	(State)	(Zip Code)	
Sacramento	California	95814	
I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.			
		2/24/06	
(Signature of Authorizing Officer or Person Represented)		(Date)	